

Attorney's Docket No. LIT-PI-304A

COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL
CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: (check one applicable item below)

- ☐ original ☐ design ☐ supplemental
☐ national stage of PCT
☐ divisional ☒ continuation ☐ continuation-in-part (CIP)

I hereby certify that this document is being deposited with United States Postal Service as first class mail in an envelope addressed to the Commissioner of Patents and Trademark, Washington, D.C. 20231.

Date of Deposit 1-10-00
Patricia Butikofer
Type or print name of person mailing paper
Patricia Butikofer
Signature of person mailing paper

INVENTORSHIP IDENTIFICATION

My residence post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

SENSOR SYSTEM FOR BURIED WASTE CONTAINMENT SITES

SPECIFICATION IDENTIFICATION

the specification of which: (complete (a), (b) or (c))

- (a) ☐ is attached hereto.
(b) ☒ was filed on 10/14/99 as Serial No. 09/418,681; or
☐ Express Mail No. _____, as Serial No., not yet known;
and was amended on _____ (if applicable).
(c) ☐ was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____ (if any).

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations. Section 1.56(a).

☐ In compliance with this duty there is attached an information disclosure statement.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(d) ☒ no such applications have been filed.

(e) ☐ such applications have been filed as follows:

NOTE: where item (c) is entered above and the International Application which designated the U.S. claimed priority check item (e), enter the details and make the priority claim.

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

| COUNTRY | APPLICATION NUMBER | DATE OF FILING (day, month, year) | PRIORITY CLAIMED UNDER 37 USC 119 |
|---------|--------------------|--------------------------------------|--|
| | | | <input type="checkbox"/> YES NO <input type="checkbox"/> |
| | | | <input type="checkbox"/> YES NO <input type="checkbox"/> |
| | | | <input type="checkbox"/> YES NO <input type="checkbox"/> |
| | | | <input type="checkbox"/> YES NO <input type="checkbox"/> |
| | | | <input type="checkbox"/> YES NO <input type="checkbox"/> |

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number.)

W. Gary Goodson
Reg. No. 22,387

(check the following item, if applicable)

☐ Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO:

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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of this continuation application or any patent issued thereon.

SIGNATURE(S)

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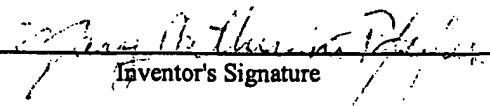
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